

**ON-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**FLORIDA STATE PRISON**

for the

Physical and Mental Health Survey  
Conducted April 9 - 10, 2014

**CMA STAFF**

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CAP Assessment Distributed on September 22, 2014

## CAP Assessment of Florida State Prison

### I. Overview

On April 9 - 10, 2014, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Florida State Prison (FSP). The survey report was distributed on April 25, 2014. In May of 2014, FSP submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the April 2014 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than ninety days. On August 22, 2014, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, CMA staff conducted an on-site CAP assessment on September 18, 2014 to evaluate the effectiveness of corrective actions taken by institutional staff. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

### II. Physical Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 13 of the 16 physical health findings were corrected. Three physical health findings will remain open.

Finding	CAP Evaluation Outcome
<b><u>CARDIOVASCULAR CLINIC RECORD REVIEW</u></b>  <b>PH-1: A comprehensive review of 16 inmate records revealed the following deficiencies:</b>  <b>(a) In 6 records, the baseline information was incomplete or missing.</b>  <b>(b) In 2 of 7 applicable records, there was no evidence that inmates with atherosclerotic cardiovascular disease were prescribed low dose aspirin or that contraindication was documented in the record.</b>  <b>(c) In 6 of 15 applicable records, there was no evidence of pneumococcal vaccine or refusal.</b>	<b>PH-1(a) OPEN</b>  Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-1(a) will remain open.  <b>PH-1(b) &amp; (c) CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close PH-1(b) & (c).

Finding	CAP Evaluation Outcome
<p><b><u>ENDOCRINE CLINIC RECORD REVIEW</u></b></p> <p><b>PH-2: A comprehensive review of 12 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 3 of 7 applicable records, there was no evidence of an annual dilated fundoscopic examination.</b></p> <p><b>(b) In 1 of 5 applicable records, there was no evidence of pneumococcal vaccine or refusal.</b></p>	<p><b>PH-2(a) &amp; (b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2 (a) &amp; (b).</p>

Finding	CAP Evaluation Outcome
<p><b><u>MISCELLANEOUS CLINIC RECORD REVIEW</u></b></p> <p><b>PH-3: In 3 of 11 records reviewed, the baseline information was incomplete or missing.</b></p>	<p><b>PH-3 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-3 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><b><u>ONCOLOGY CLINIC RECORD REVIEW</u></b></p> <p><b>PH-4: A comprehensive review of 5 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 3 records, the baseline information was incomplete or missing.</b></p> <p><b>(b) In 4 records, there was no evidence of pneumococcal vaccine or refusal.</b></p>	<p><b>PH-4(a) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-4(a) will remain open.</p> <p><b>PH-4(b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-4(b).</p>

Finding	CAP Evaluation Outcome
<p><b><u>RESPIRATORY CLINIC RECORD REVIEW</u></b></p> <p><b>PH-5: In 7 of 14 records reviewed, there was no evidence of pneumococcal vaccine or refusal.</b></p>	<p><b>PH-5 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5.</p>

Finding	CAP Evaluation Outcome
<p><b><u>TUBERCULOSIS CLINIC RECORD REVIEW</u></b></p> <p><b>PH-6: In 1 of 4 applicable records (6 reviewed); there was no evidence of influenza vaccine or refusal.</b></p>	<p><b>PH-6 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-6.</p>

Finding	CAP Evaluation Outcome
<p><b><u>CONSULTATIONS RECORD REVIEW</u></b></p> <p><b>PH-7: In 7 of 10 records reviewed, the diagnosis was not accurately recorded on the problem list.</b></p>	<p><b>PH-7 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-7.</p>

Finding	CAP Evaluation Outcome
<p><b><u>MEDICATION ADMINISTRATION RECORD REVIEW</u></b></p> <p><b>PH-8: In 3 of 14 records reviewed, the medication orders did not include the route of administration of the medication.</b></p>	<p><b>PH-8 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-8.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INTRA-SYSTEM TRANSFER RECORD REVIEW</u></b></p> <p><b>PH-9: In 3 of 15 records reviewed, there was no evidence that a clinician reviewed the health record and the Health Information Transfer/Arrival Summary (DC4-760A) within 7 days of arrival.</b></p>	<p><b>PH-9 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9.</p>

Finding	CAP Evaluation Outcome
<p><b><u>DENTAL CARE RECORD REVIEW</u></b></p> <p><b>PH-10: In 5 of 18 records reviewed, there was no evidence the allergy box on the outside of the dental record was completed.</b></p>	<p><b>PH-10 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10.</p>

Finding	CAP Evaluation Outcome
<p><b><u>PHARMACY SERVICES</u></b></p> <p><b>PH-11: There was no evidence that proper stock levels of over-the-counter medications were maintained.</b></p>	<p><b>PH-11 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-11.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INSTITUTIONAL TOUR</u></b></p> <p><b>PH-12: A tour of the facility revealed that medical equipment was not in proper working condition in the sick call triage/exam rooms</b></p>	<p><b>PH-12 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-12.</p>

## **B. West Unit**

The CAP closure files revealed sufficient evidence to determine that 21 of the 26 physical health findings were corrected. Five physical health findings will remain open.

<b>Finding</b>	<b>CAP Evaluation Outcome</b>
<p><b><u>CARDIOVASCULAR CLINIC RECORD REVIEW</u></b></p> <p><b>PH-1: A comprehensive review of 16 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 6 records, the baseline information was incomplete or missing.</b></p> <p><b>(b) In 6 of 15 applicable records, there was no evidence of pneumococcal vaccine or refusal</b></p>	<p><b>PH-1(a) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-1(a) will remain open.</p> <p><b>PH-1(b) OPEN</b></p> <p>Adequate evidence of in-service training was provided however institutional monitoring indicated that an acceptable level of compliance had not been reached. PH-1(b) will remain open.</p>

<b>Finding</b>	<b>CAP Evaluation Outcome</b>
<p><b><u>ENDOCRINE CLINIC RECORD REVIEW</u></b></p> <p><b>PH-2: A comprehensive review of 12 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 6 records, the baseline information was incomplete or missing.</b></p> <p><b>(b) In 7 records, the annual laboratory work was incomplete.</b></p> <p><b>(c) In 4 of 11 applicable records, there was no evidence of an annual fundoscopic examination.</b></p> <p><b>(d) In 7 of 11 applicable records, there was no evidence of influenza vaccine or refusal.</b></p>	<p><b>PH-2(a) – (c) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-2(a) – (c).</p> <p><b>PH-2(d) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-2(d) will remain open.</p>

Finding	CAP Evaluation Outcome
<p><b><u>GASTROINTESTINAL CLINIC RECORD REVIEW</u></b></p> <p><b>PH-3: A comprehensive review of 14 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 5 records, the baseline information was incomplete or missing.</b></p> <p><b>(b) In 3 of 12 applicable records, hepatitis A &amp; B vaccine was not given to inmates with hepatitis C infection and no prior history of A &amp; B infection.</b></p>	<p><b>PH-3(a) OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of randomly selected records indicated that an acceptable level of compliance had not been reached. PH-3(a) will remain open.</p> <p><b>PH-3(b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-3(b).</p>

Finding	CAP Evaluation Outcome
<p><b><u>IMMUNITY CLINIC RECORD REVIEW</u></b></p> <p><b>PH-4: In 2 of 10 records reviewed, there was no evidence of influenza vaccine or refusal.</b></p>	<p><b>PH-4 OPEN</b></p> <p>Adequate evidence of in-service training was provided however institutional monitoring indicated that an acceptable level of compliance had not been reached. PH-4 will remain open.</p>

Finding	CAP Evaluation Outcome
<p><b><u>MISCELLANEOUS CLINIC RECORD REVIEW</u></b></p> <p><b>PH-5: A comprehensive review of 10 inmate records revealed the following deficiencies:</b></p> <p><b>(a) In 4 records, the baseline information was incomplete or missing.</b></p> <p><b>(b) In 5 of 8 applicable records, there was</b></p>	<p><b>PH-5(a) &amp; (b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-5(a) &amp; (b).</p>

Finding	CAP Evaluation Outcome
no evidence of pneumococcal vaccine or refusal.	

Finding	CAP Evaluation Outcome
<u><b>NEUROLOGY CLINIC RECORD REVIEW</b></u>  <b>PH-6: In 6 of 7 records reviewed, seizures were not classified.</b>	<b>PH-6 CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close PH-6.

Finding	CAP Evaluation Outcome
<u><b>ONCOLOGY CLINIC RECORD REVIEW</b></u>  <b>PH-7: A comprehensive review of 1 inmate record revealed the following deficiencies:</b>  <b>(a) The baseline information was incomplete or missing.</b>  <b>(b) There was no evidence of pneumococcal vaccine or refusal.</b>	<b>PH-7(a) &amp; (b) CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close PH-7(a) & (b).

Finding	CAP Evaluation Outcome
<u><b>RESPIRATORY CLINIC RECORD REVIEW</b></u>  <b>PH-8: A comprehensive review of 13 inmate records revealed the following deficiencies:</b>  <b>(a) In 5 records, the baseline information was incomplete or missing.</b>  <b>(b) In 6 records, reactive airway diseases were not classified.</b>	<b>PH-8(a) – (e) CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close PH-8(a) – (e).



Finding	CAP Evaluation Outcome
<p>(c) In 4 records, peak flow readings were not recorded at each visit.</p> <p>(d) In 7 records, there was no evidence of pneumococcal vaccine or refusal.</p> <p>(e) In 5 records, there was no evidence of influenza vaccine or refusal.</p>	

Finding	CAP Evaluation Outcome
<p><b><u>TUBERCULOSIS CLINIC RECORD REVIEW</u></b></p> <p><b>PH-9: A comprehensive review of 9 inmate records revealed the following deficiencies:</b></p> <p>(a) In 1 of 2 applicable records, there was no evidence of pneumococcal vaccine or refusal.</p> <p>(b) In 1 of 1 applicable record, there was no evidence of influenza vaccine or refusal.</p>	<p><b>PH-9(a) &amp; (b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-9(a) &amp; (b).</p>

Finding	CAP Evaluation Outcome
<p><b><u>INFIRMARY RECORD REVIEW</u></b></p> <p><b>PH-10: In 1 of 4 applicable records (9 reviewed), there was no discharge note contained in the medical record.</b></p>	<p><b>PH-10 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-10.</p>

Finding	CAP Evaluation Outcome
<p><b><u>CONSULTATIONS RECORD REVIEW</u></b></p> <p><b>PH-12: In 7 of 12 records reviewed, the diagnosis was not accurately recorded on the problem list.</b></p>	<p><b>PH-12 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-12.</p>

Finding	CAP Evaluation Outcome
<p><b><u>MEDICATION ADMINISTRATION - PILL LINE OBSERVATION</u></b></p> <p><b>PH-13: A review of pill line administration practices revealed that an oral cavity check was not conducted for each inmate.</b></p>	<p><b>PH-13 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-13.</p>

Finding	CAP Evaluation Outcome
<p><b><u>INSTITUTIONAL TOUR</u></b></p> <p><b>PH-14: A tour of the facility revealed the following deficiencies:</b></p> <p><b>(a) Procedures to access medical and dental services were not posted in the dormitory areas.</b></p> <p><b>(b) Medical equipment was not in proper working condition.</b></p>	<p><b>PH-14(a) &amp; (b) CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close PH-14(a) &amp; (b).</p>

### III. Mental Health Assessment Summary

#### A. Main Unit

The CAP closure files revealed sufficient evidence to determine that 8 of 8 mental health findings were corrected. All mental health findings will close.

Finding	CAP Evaluation Outcome
<p><b><u>SELF-HARM OBSERVATION STATUS</u></b></p> <p><b>MH-1: A comprehensive review of 12 Self-harm Observation Status (SHOS) admissions records revealed the following deficiencies:</b></p> <p><b>(a) In 3 of 11 applicable records, the inmate's admission orders were not signed/countersigned and/or not dated/timed.</b></p> <p><b>(b) In 4 records, the documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</b></p>	<p><b>MH-1 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-1 (a) - (b).</p>

Finding	CAP Evaluation Outcome
<p><b><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></b></p> <p><b>MH-2: A comprehensive review of 9 outpatient records revealed the following deficiencies:</b></p> <p><b>(a) In 1 of 3 applicable records, the psychiatric evaluation was not completed prior to initially prescribing psychotropic medication.</b></p> <p><b>(b) In 1 of 3 applicable records, abnormal lab tests were not followed- up as required.</b></p> <p><b>(c) In 1 of 4 applicable records, there was no indication that the baseline AIMS was administered upon initiation of</b></p>	<p><b>MH-2 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-2 (a) – (c).</p>

Finding	CAP Evaluation Outcome
psychotropic medication and/or every six months after.	

Finding	CAP Evaluation Outcome
<p><b><u>OUTPATIENT MENTAL HEALTH SERVICES</u></b></p> <p><b>MH-3: In 3 of 13 records reviewed, the Health Information Arrival/Transfer Summary lacked the prompted information or was not completed within 24 hours of arrival</b></p>	<p><b>MH-3 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-3.</p>

Finding	CAP Evaluation Outcome
<p><b><u>MENTAL HEALTH SYSTEMS REVIEW</u></b></p> <p><b>MH-4: A tour of the facility revealed that paint was peeling from the walls of Suicide Observation Status (SHOS) cells.</b></p> <p><b>MH-5: Inmates on close management status were not provided the opportunity to sign the Refusal of Health Care Services (DC4-711A) for group activities.</b></p>	<p><b>MH-4 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-4.</p> <p><b>MH-5 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-5.</p>

**B. Annex**

The CAP closure files revealed evidence to determine that 3 of 3 mental health findings were corrected. All mental health findings will close.

Finding	CAP Evaluation Outcome
<b><u>OUTPATIENT MENTAL HEALTH SERVICES</u></b>  <b>MH-1: In 4 of 10 records reviewed, the Individualized Service Plan (ISP) was not signed by all members of the Multidisciplinary Service Team (MDST).</b>	<b>MH-1 CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close MH-1.

Finding	CAP Evaluation Outcome
<b><u>MENTAL HEALTH SYSTEMS REVIEW</u></b>  <b>MH-2: The mental health program descriptions were not posted in the dormitory areas.</b>  <b>MH-3: A tour of the facility revealed that paint was peeling from the walls of Suicide Observation Status (SHOS) cells.</b>	<b>MH-2 CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close MH-2.  <b>MH-3 CLOSED</b>  Adequate evidence of in-service training and documentation of correction were provided to close MH-3.

#### **IV. Conclusion**

##### **Physical Health-Main Unit**

Thirteen findings will close and three physical health findings will remain open.

##### **Physical Health-West Unit**

Twenty-one findings will close and five physical health findings will remain open.

##### **Mental Health-Main Unit**

All mental health findings will close.

##### **Mental Health-West Unit**

All mental health findings will close.

Until such time as appropriate corrective actions are undertaken by FSP staff and the results of those corrections reviewed by the CMA, this CAP will remain open. As some of the necessary steps to correct findings require further institutional monitoring, closure may take as long as three months. Follow-up assessment by the CMA will most likely take place through an off-site visit, but the option remains open to conduct an on-site evaluation.